

General Assembly

Raised Bill No. 6538

January Session, 2009

LCO No. 3568

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Referred to Committee on Public Health

Introduced by: (PH)

AN ACT CONCERNING THE COLLECTION AND RELEASE OF DATA BY THE OFFICE OF HEALTH CARE ACCESS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- 1 Section 1. Section 19a-654 of the general statutes is repealed and the
- 2 following is substituted in lieu thereof (Effective October 1, 2009):
- 3 (a) For purposes of this section "patient-identifiable data" means any
- 4 information that singly or collectively refers to a patient and permits
- 5 positive or probable identification of that patient.
- 6 (b) The Office of Health Care Access shall require short-term acute
- 7 care general or children's hospitals and may require a health care
- 8 <u>facility or institution, as defined in section 19a-630,</u> to submit [such]
- 9 <u>patient-identifiable</u> data, including <u>inpatient</u> discharge data, [as it
- 10 deems necessary to fulfill the responsibilities of the office. Such data
- 11 shall include] outpatient encounter data, data taken from medical
- 12 record abstracts and hospital bills and such other data as deemed
- 13 necessary by the office to fulfill the duties specified in section 19a-613.
- 14 The office shall specify the timing and format of such data submission,
- 15 [shall be specified by the office] provided the initial date of data

submission for all health care facilities other than short-term acute care general or children's hospitals shall be no earlier than July 1, 2011. [The data may be submitted] A hospital or a health care facility or institution, as defined in section 19a-630, may submit data through a contractual arrangement with an intermediary, [. If the data is submitted through an intermediary, the] provided such hospital [shall ensure] or health care facility or institution ensures that such data submission is timely and that the data is accurate. The office may conduct an audit of the data submitted [to] through such intermediary in order to verify its accuracy. [Individual patient and physician data identified by proper name or personal identification code submitted pursuant to this section shall be kept confidential, but aggregate reports from which individual patient and physician data cannot be identified shall be available to the public.]

(c) The office shall release data and aggregate reports which do not contain patient-identifiable data to the public. The office may release patient-identifiable data in accordance with the provisions of this subsection, section 2 of this act, and regulations adopted by the office pursuant to subsection (d) of this section. Patient-identifiable data shall only be released to qualified researchers who demonstrate to the satisfaction of the office a direct and tangible noncommercial health related interest in obtaining such data. For purposes of this subsection, "qualified researchers" shall include treating hospitals or facilities, state and federal agencies, research institutions or any agent thereof and such other entities who have contracted with the office to accomplish the purposes of this subsection. Patient-identifiable data released shall be released in the format prescribed by the office and in accordance with regulations adopted by the office pursuant to subsection (d) of this section.

(d) The Commissioner of Health Care Access shall adopt regulations, in accordance with chapter 54, to implement the data collection processes set forth in this section and section 2 of this act.

Sec. 2. (NEW) (Effective October 1, 2009) (a) The Commissioner of Health Care Access shall establish a data protection committee. The committee shall be comprised of the following members: The Commissioner of Health Care Access, or the commissioner's designee, the Secretary of the Office of Policy and Management, or the secretary's designee, the Commissioner of Public Health, or the commissioner's designee, a hospital administrator, a physician licensed by the Department of Public Health under chapter 370 of the general statutes, a representative of third-party health care payers, an attorney with expertise in compliance with the federal Health Insurance Portability and Accountability Act of 1996 (P.L. 104-191) (HIPAA), as amended from time to time, an expert in health care policy and research and an expert in health information technology. All appointments to the committee shall be made by the Commissioner of Health Care Access not later than January 1, 2010. Members appointed to the committee shall serve for a term of two years and shall serve no more than four terms. The Commissioner of Health Care Access, or the commissioner's designee, shall serve as the chairperson of the data protection committee. The Commissioner of Health Care Access shall fill any vacancy on the committee not later than sixty days after the date of receiving notice of such vacancy.

- (b) The data protection committee shall: (1) Advise the Office of Health Care Access on the release of patient-identifiable data with the objective of preserving patient confidentiality in a manner that conforms with state and federal law but also furthers the public interest in the disclosure of certain data; and (2) meet quarterly and more often upon the call of the chairperson to review written applications submitted to the office for the release of patient-identifiable data in accordance with the provisions set forth in this section and section 19a-654 of the general statutes, as amended by this act.
- 79 (c) Any person requesting the release of patient-identifiable data 80 shall make such request, in writing, by completing a data use

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81 application form provided by the Office of Health Care Access. Each 82 application for the release of patient-identifiable data shall be 83 accompanied by an application fee of one hundred dollars. The 84 Commissioner of Health Care Access may waive the application fee 85 when: (1) The applicant demonstrates to the satisfaction of the 86 commissioner that payment of such fee creates an undue hardship; or 87 (2) a reciprocal agreement is in place that allows in-state entities to 88 obtain similar information from out-of-state governmental agencies. 89 The data use application form shall require the applicant to indicate: 90 (A) A summary of the research study or research project activities 91 requiring access to patient-identifiable data; (B) the proposed data 92 uses; (C) a description of any products, including, but not limited to, 93 studies and reports that will be produced utilizing the requested data; 94 (D) security and privacy measures that the applicant will take to 95 ensure that the patient's privacy is protected; and (E) such other 96 information as may be required by the office. The Commissioner of 97 Health Care Access or the commissioner's designee shall provide 98 copies of all written requests for the release of patient-identifiable data 99 to the data protection.

(d) The data protection committee, after reviewing a written data use application, shall approve or reject such application. If the data protection committee rejects a data use application, the committee shall set forth, in writing, the reasons for the rejection of the application. Any applicant whose application for the release of patient-identifiable data is rejected may reapply to the Office of Health Care Access for the release of such data in accordance with the provisions of subsection (c) of this section. If an application for the release of patient-identifiable data is approved by the data protection committee, prior to the release of such patient-identifiable data to the applicant, the Commissioner of Health Care Access shall require that such applicant sign a data use agreement on such forms as the commissioner prescribes. The data use agreement shall specify the rights and obligations of any person who receives patient-identifiable information from the commissioner, including penalties that may be imposed for

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established violations of such agreement.

- 116 Sec. 3. (NEW) (Effective October 1, 2009) (a) If the Commissioner of Health Care Access has reason to believe that any person, who has 117 118 signed a data use agreement provided pursuant to section 2 of this act, 119 has disclosed patient-identifiable data or otherwise violated the terms 120 of the data use agreement, the commissioner shall immediately notify 121 such person of the alleged violation by certified mail, return receipt 122 requested. Such notice shall include: (1) A reference to any applicable 123 federal or state law; (2) a concise statement of the activities asserted to 124 constitute a violation of the data use agreement; (3) an order from the 125 commissioner advising such person to immediately cease and desist 126 from engaging in the activities that the commissioner asserts to be in 127 violation of the data use agreement; (4) a statement of the amount of 128 civil penalty or penalties that may be imposed with the date that such 129 penalty or penalties may be imposed; and (5) a statement of the 130 person's right to a hearing.
 - (b) The person to whom such notice is addressed shall have ten calendar days from the date of receipt of such notice to make a written request to the Office of Health Care Access for a hearing to contest the alleged violation and the imposition of any civil penalty. A failure to make a timely request for a hearing shall result in the issuance of a final order and the imposition of penalties as prescribed in subsection (c) of this section. All hearings held under this section shall be conducted in accordance with the provisions of chapter 54 of the general statutes.
 - (c) The Commissioner of Health Care Access may impose a civil penalty of not less than one thousand dollars but not more than five thousand dollars per violation for any disclosure of patient-identifiable data or other violation of the terms of a data use agreement that is in violation of a data use agreement entered into pursuant to section 2 of this act.
- 146 (d) A final order of the Office of Health Care Access assessing a civil

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147 penalty shall be subject to appeal as set forth in section 4-183 of the 148 general statutes, after a hearing before the office pursuant to 149 subsection (b) of this section, except that any such appeal shall be 150 taken to the superior court for the judicial district of New Britain. Such 151 final order shall not be subject to appeal under any other provision of 152 the general statutes. No challenge to any such final order shall be 153 allowed as to any issue which could have been raised by an appeal of 154 an earlier order, denial or other final decision by the office.

- (e) Civil penalties imposed pursuant to this section shall be paid not later than fifteen days after the final date by which an appeal may be taken or, if an appeal is taken, not later than fifteen days after the final judgment on such appeal. In the event that such fines are not paid, the Commissioner of Health Care Access shall notify the Attorney General who shall seek judicial enforcement of the civil penalties in accordance with the provisions of section 19a-642 of the general statutes.
- (f) The Commissioner of Health Care Access may adopt regulations, in accordance with the provisions of chapter 54 of the general statutes, as are necessary to implement this section.

This act shall take effect as follows and shall amend the following sections:		
Section 1	October 1, 2009	19a-654
Sec. 2	October 1, 2009	New section
Sec. 3	October 1, 2009	New section

Statement of Purpose:

To allow greater access to data collected by the Office of Health Care Access while ensuring that patient privacy rights are protected.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]

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